

## PART B - FEE(S) TRANSMITTAL

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Stephen M. Haracz  
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1290 Avenue of the Americas  
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03/14/2008 RMEBRAH 00000011 10528892

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Charles M. Avigliano

(Depositor's name)

Charles M. Avigliano

(Signature)

March 7, 2008

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/528,892	03/23/2005	Tatsuo Hoshino	21413 US C038435/0185654	4644

TITLE OF INVENTION: PROCESS FOR PRODUCING VITAMIN B6

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	03/10/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
FRONDA, CHRISTIAN L	1652	435-041000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

DSM IP Assets B.V.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

6411 TE Heerlen, The Netherlands

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
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- ☒ A check is enclosed.  
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-4467 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Charles M. Avigliano

Date March 7, 2008

Typed or printed name Charles M. Avigliano

Registration No. 52,578

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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March 7, 2008

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**Bryan Cave LLP**  
1290 Avenue of the Americas  
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Re: U.S. Patent Application Serial No. 10/528,892  
Filed: March 23, 2005  
For: **PROCESS FOR PRODUCING VITAMIN B<sub>6</sub>**  
Your Ref: 21413 US Our Ref: C038435/0185654

Sir:

Enclosed are a completed Issue Fee Transmittal Form PTOL-85 (in duplicate), a check in the amount of \$1,740.00 for the issue and publication fees, and a check in the amount of \$9.00 for three (3) soft copies of the patent.

If either check or both checks are missing or otherwise insufficient, or if any additional fees are required, please charge the fee (or credit any overpayment) to Deposit Account No. 02-4467. A copy of this letter is enclosed.

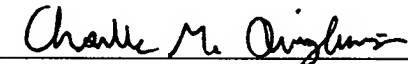
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Charles M. Avigliano, Reg. No. 52,578

Respectfully submitted,

By:   
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